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CONFIRMATION NO. 5682

SERIAL NUMBER 10/722,590	FILING OR 371(c) DATE 11/25/2003 RULE	CLASS 374	GROUP ART UNIT 2859	ATTORNEY DOCKET NO. 00467/100M163-US1
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APPLICANTS
 Stephen Russak, Fort Lee, NJ;
 Andrew Howansky, Copake Falls, NY;
 Jim Best, Weehawken, NJ;
 Scott Henderson, Brooklyn, NY;
 Timothy Kennedy, Staten Island, NY;
 Daniel Formosa, Montvale, NJ;
 Wilfrido L. Canizares, Brooklyn, NY; *no ac*

**** CONTINUING DATA *******
 This appln claims benefit of 60/428,823 11/25/2002

**** FOREIGN APPLICATIONS ******* *yes ac*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 02/25/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ac</i> Examiner's Signature Initials	STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS <i>21</i>	INDEPENDENT CLAIMS 3
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ADDRESS
7278 *14/15*

TITLE
Axillary thermometer

FILING FEE RECEIVED 918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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